Application Data Sheet

Application Information

Application Type::

Subject Matter::

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R::

Regular

Utility

128/200

None

Title:: Nasal Mask and System Using Same

Attorney Docket Number:: 98-25 C3

Request for Early Publication?::

Request for Non-Publication?::

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?::

Petition included?::

Secrecy Order in Parent Appln.?::

No

Applicant Information

Applicant Authority Type:: Inventor Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Shari Middle Name:: S

Family Name:: Barnett
City of Residence:: Cardiff
State or Province of Residence:: California
Country of Residence:: USA

Street of mailing address:: 1770 Ribemstein Drive

City of mailing address:: Cardiff
State or Province of mailing address:: California
Country of mailing address:: USA

Applicant Authority Type:: Inventor Primary Citizenship Country:: US

Postal or Zip Code of mailing address::

Status:: Full Capacity

Given Name:: Joseph
Middle Name:: M
Family Name:: Miceli
Name Suffix:: Jr.

City of Residence:: Pittsburgh
State or Province of Residence:: Pennsylvania

92007

Country of Residence:: USA

Street of mailing address:: 4850 Hialeah Drive

City of mailing address:: Pittsburgh
State or Province of mailing address:: Pennsylvania

Country of mailing address:: USA Postal or Zip Code of mailing address:: 15239

Applicant Authority Type:: Inventor

Primary Citizenship Country:: United Kingdom Status:: Full Capacity

Given Name:: Peter Family Name:: Ho

City of Residence:: Pittsburgh
State or Province of Residence:: Pennsylvania

Country of Residence:: USA

Street of mailing address:: 2227 Chapparal Drive

City of mailing address:: Pittsburgh
State or Province of mailing address:: Pennsylvania

Country of mailing address:: USA Postal or Zip Code of mailing address:: 15239

Applicant Authority Type:: Inventor Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Kristine Middle Name:: K

Family Name:: Sabo

City of Residence::

State or Province of Residence::

New Kensington
Pennsylvania

Country of Residence:: USA

Street of mailing address::

City of mailing address::

State or Province of mailing address::

136 Venango Court

New Kensington

Pennsylvania

Country of mailing address:: USA Postal or Zip Code of mailing address:: 15068

Correspondence Information

Correspondence Customer Number:: 30031

Representative Information

Representative Customer Number:: 30031

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date:
This Application	Continuation of	09/865,327	05/25/01
09/865,327	Continuation-in-part-of	09/310,548	05/12/99

Respironics, Inc.

Assignee Information

Assignee name::

Street of mailing address:: 1010 Murry Ridge Lane

City of mailing address::
State or Province of mailing address:: Murrysville Pennsylvania

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 15668